



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1131

DATE: May 21, 2012

TO: All Iowa Medicaid Providers (Excluding Individual Consumer Directed Attendant Care)

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Medicaid Member Co-pay Clarification

EFFECTIVE: Immediately

The Iowa Medicaid Enterprise wishes to remind providers of the IME policy regarding member co-payments for services rendered. The copay is applied per date of service, except for pharmacy, which is per prescription. Dually eligible Medicare and Medicaid members must make a copayment of **\$1.00** for Medicare Part B (crossover) claims submitted to Medicaid for services in which Medicaid collects a copayment.

SERVICE COPAY	CURRENT COPAY	RX	CURRENT
CHIROPRACTIC SERVICES	\$1.00	GENERIC DRUG	\$1.00
PHYSICAL THERAPISTS	\$1.00	NON-PREFERRED \$25.01- \$50.00	\$2.00
PODIATRIST	\$1.00	NON-PREFERRED \$50.01 or MORE	\$3.00
MEDICARE XOVER CLAIM	\$1.00		
AMBULANCE	\$2.00		
AUDIOLOGIST	\$2.00		
HEARING AID DEALER	\$2.00		
MEDICAL SUPPLIES/DME	\$2.00		
OPTICIAN	\$2.00		
OPTOMETRIST	\$2.00		
ORTHOPEDIC SHOE DEALER	\$2.00		
PROSTHETIC DEVICES	\$2.00		
PSYCHOLOGIST	\$2.00		
REHAB AGENCY	\$2.00		
DENTAL	\$3.00		
HEARING AIDS	\$3.00		
PHYSICIAN OFFICE VISIT (MD, DO)	\$3.00		
NON-EMERGENT ER	\$3.00		

Copay Exclusions:

- Recipients under Age 21
- Family Planning Services
- Services for Pregnant Women
- Recipients Residing in an Institution (SNF, ICF, ICF/MR, or State Mental Health Institute)-Except Transferred Resources
- Emergency Services
- HMO Covered Services
- American Indians and Alaska Natives
- Recipients with Limited Eligibility such as Three Day Emergent Care, Coverage for Emergency Service and Delivery or Resident Aliens

Please note that as a condition of participating in the Medicaid program, you may not deny care or services to a member because of the member's inability to pay a copayment. A statement that the person is unable to pay establishes inability to pay. This does not remove the member's liability for these charges, and does not preclude you from attempting to collect the copayment.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or locally in Des Moines at 515-256-4609 or by email imeproviderservices@dhs.state.ia.us.